

# Developing Therapeutic Interventions in EP Practice: Reflections on Unconscious Processes and Promoting the Child's Voice

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This paper draws on the personal experiences of developing and carrying out an individual and group therapeutic intervention. It will reflect on the factors that impacted psychological formulation throughout the intervention process. The paper will draw on how psychological theories such as Bion's (1961) theory of group processes and systemic thinking, can be used to understand unconscious processes in groups and the complexity of formulation. The aim is to provide insight into unconscious processes within groups and reflect on how the voice of the child can be promoted through therapeutic interventions. As the paper reflects on personal experience, it will conclude with some implications for educational psychology practice.

*Keywords:* therapeutic intervention, unconscious processes, psychological formulation, voice of the child

## Context

The paper is written from the perspective of a year-2 trainee educational psychologist (EP) who carried out the interventions whilst on placement in a London borough. As part of her doctoral training, the trainee was required to write a critical review of her direct interventions with children and groups of children. For these reasons, the following sections will be written in the first person. The critical review will provide reflections on the development of the interventions and the factors that impacted this development. The structure of the paper will begin with exploring the stages of psychological formulation for the individual intervention with a child called Jesiah. For this paper, the name Jesiah will be used as an anonymity pseudonym. Following this, reflections will be made on carrying out the group intervention with regard to formulation and unconscious processes involved when managing competing demands of promoting autonomy as well as a sense of belonging.

## Background

### Therapeutic Practice

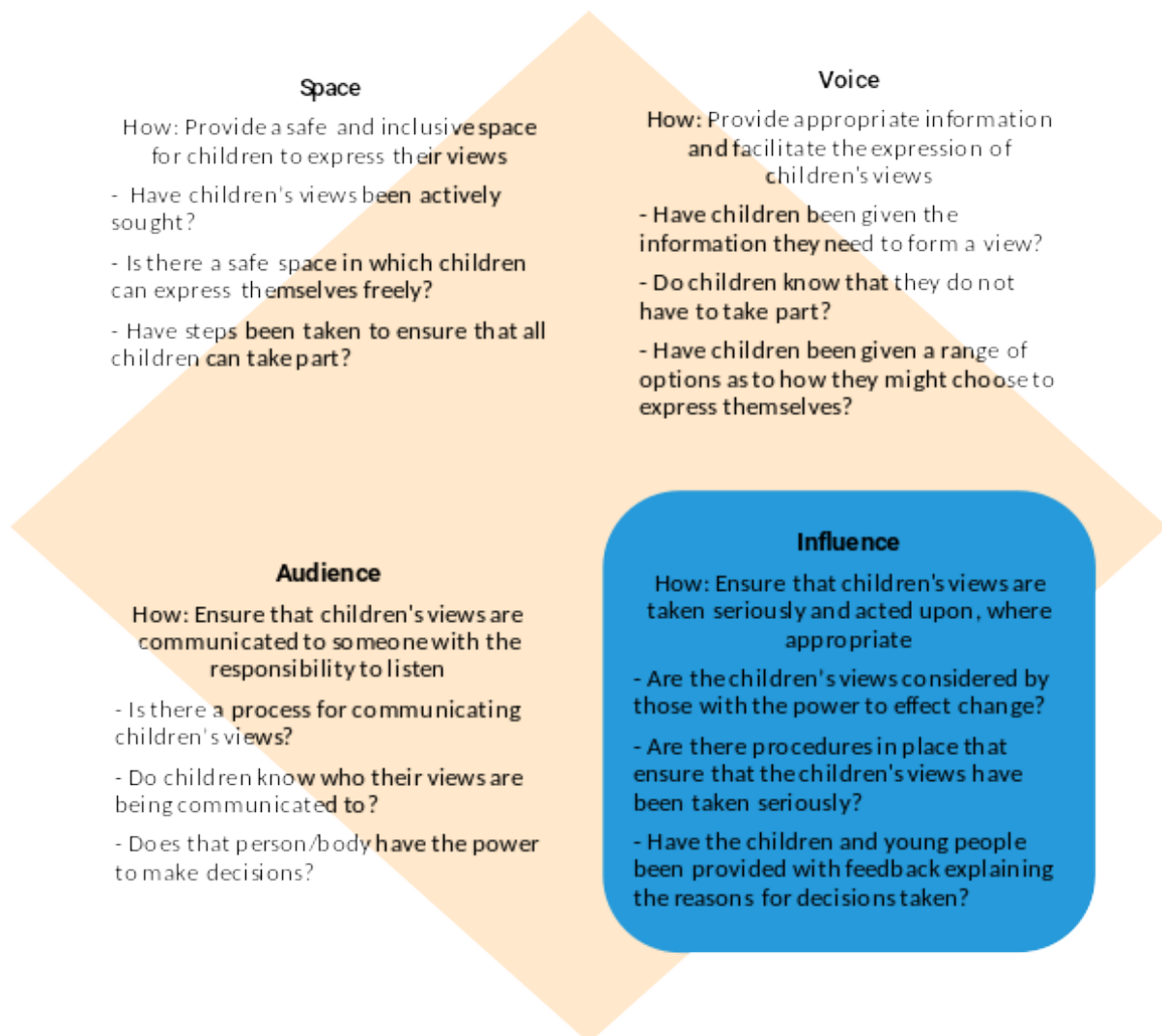
With the prevalence of mental health difficulties in children and young people (CYP), there is restored interest in therapeutic approaches in educational psychology practice (Atkinson, Bragg, Squires, Wasilewski, & Muscutt, 2012). Although EPs are positioned as being best placed to work therapeutically in schools, it has been argued that EPs take up various positions in relation to therapeutic work (Wade, 2016). Relational aspects of therapeutic practice are considered to be important to an EP's skills set and, as someone new to the profession, I felt I had sufficient agency to embed therapeutic practices within the EP role.

## The Voice of the Child

The voice of the child has gained prominence within educational psychology following the SEND Code of Practice (Department for Education [DfE], Department of Health [DH], 2014 and Children and Families Act (2014). The legislation and guidance ensure that children's views are collected. While the importance of listening to children and the participation of children are emphasised, in some cases the extent to which they are heard can result in superficial participation (D. Hawkins & Soni, 2018).

## Framework for Therapeutic Practice Interventions

To bridge the gap between merely obtaining their voice and genuinely listening to children, therapeutic practice can be used as a medium to promote the voice of the child. The psychological model underpinning the individual and group interventions in this paper is Lundy's Model of Participation (Lundy, 2007) (Figure 1). The premise for applying this framework is that it allows for the true nature of participation to take place where intervention is led by the needs of the children, reflecting on the child-centred approach advocated by the SEND Code of Practice (DfE, DH, 2014). This model of participation focuses on the rights of the child as reflected in the United Nations Convention on the Rights of the Child (1989). While hierarchical frameworks such as Hart's Ladder of Participation (Hart, 1992) provide a useful framework for how children can be more involved, Lundy's (2007) model focuses on the rights of the child using four key elements: space, voice, audience and influence. Within each domain there are questions to help professionals to consider if they have considered whether they have done enough to encourage the voice of the child.

**Figure 1***Lundy's Model of Participation (Lundy, 2007)***Individual Therapeutic Intervention**

The individual therapeutic intervention was carried out with Jesiah, a 9-year-old boy in Year 5. Jesiah had an older brother in Year 6 and lived with his parents. With permission from his parents, school requested a therapeutic intervention as they were concerned about his angry outbursts in school and ability to regulate his emotions. Some rationale and context was provided around this, which was that cultural differences in strict parenting styles at home meant that his feelings were often suppressed. There were five sessions in total and overarching objectives and focus areas were around emotional regulation, building self-esteem and providing a safe space to share and explore his feelings. All sessions began with a "Feelings Check-in" and were embedded with

strength-based tasks. As each session evolved onto the next, the following section reflects on how changes in formulation informed the intervention.

**Initial Formulation**

According to attribution theory (Weiner, 1972), people try to determine why individuals behave the way they do by interpreting the cause of the behaviour. With this in mind, initial formulations were informed by systemic thinking where causal attributions (linear causality) were made by inflicting blame for Jesiah's anger on parenting style and internal factors (Jesiah's emotional regulation).

Linear causality:

Jesiah: "She makes me get in trouble (that

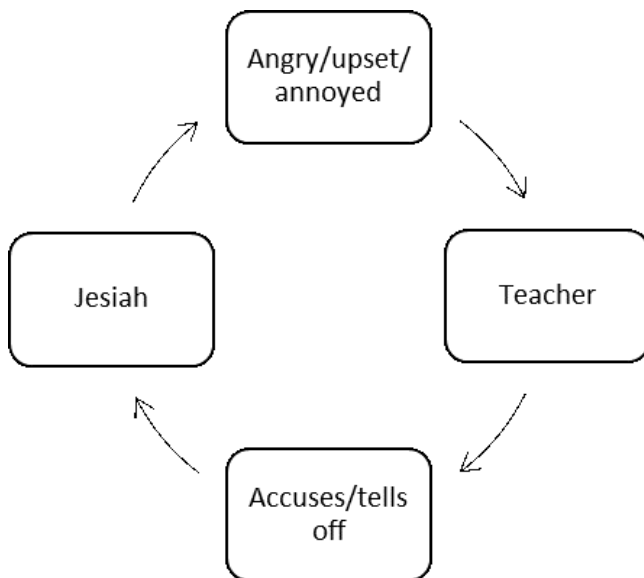
makes me angry).”

Teacher: “He gets angry for no reason.”

This was translated to a circular view (Figure 2) that considers how the actions of two or more people influence each other and whose behaviour influences them (Dallos, 1991).

**Figure 2**

*Circular Causality (Dallos, 1991)*



When the needs analysis was conducted, there was no evidence of Jesiah’s supposed outbursts. Rather than starting emotional regulation work with Jesiah immediately, an ethical decision was made to adopt a holistic approach to the intervention. With elements of power being considered an ethical issue (Etherington, 2004), I felt that it was necessary to diminish this power by developing a rapport with Jesiah over the first few sessions. Building a rapport during the earlier stages was an important part of contracting with Jesiah the purpose of sessions, that was to ensure they were focused on his interests but also provided him with a safe space to be honest about how he felt. It was important that this was mentioned at the start of all the sessions as a reminder of the child-centred approach adopted.

### Child’s Voice

Figure 3 illustrates the stages of formulation for Jesiah which shows that Jesiah felt a certain resentment towards his teacher. At this point, I realised the purpose of the intervention was multi-modal — being both therapeutic and promoting the child’s voice. It led me to consider that, despite prominence on the voice of the child in EP practice, how the child is engaged in meaningful participation is also questionable (D. Hawkins & Soni, 2018).

In the process of eliciting his views, reflections were made on how we speak with children based on one of five critical questions presented by Billington (2006).

- How do we speak with children?
- How do we speak of children (to others)?
- How do we write of children?
- How do we listen to children?
- How do we listen to ourselves (when working with children)?

The question of how we speak *of* children arose from discussions with school staff about one incident. They shared their perspectives on the reason for Jesiah’s behaviour and the impact this was having on other children and classroom dynamics. While I acknowledged their narrative around Jesiah’s behaviour, I recognised it was important to triangulate this with his views. Reflecting on whether Jesiah’s voice was truly heard, I asked curious and non-judgemental questions about how he felt or perceived the situations. His honesty indicated to me that he wanted to be heard and felt it to be important to share how he viewed the situation.

### Reformulation

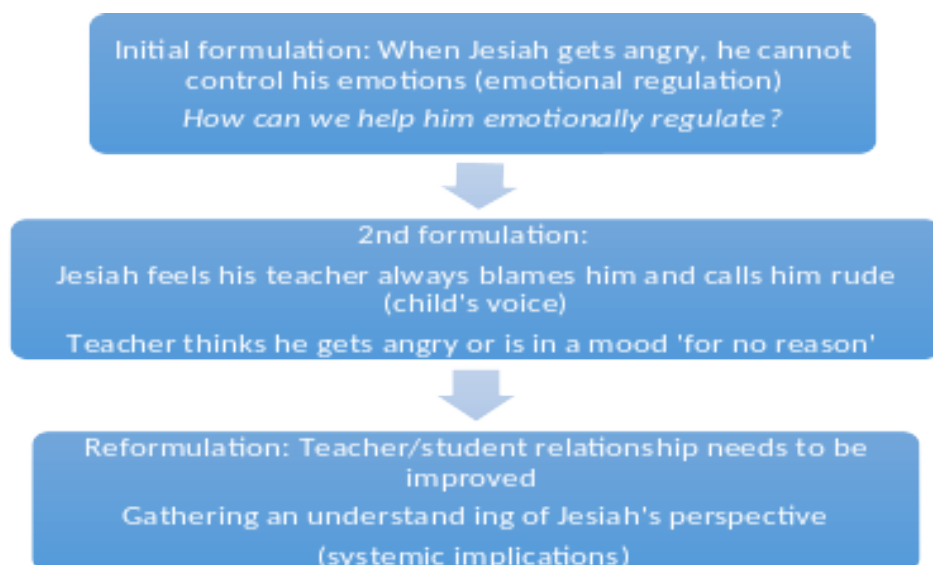
Based on this information, I hypothesised that fostering positive relationships between the teacher and student might have been underestimated. This was perpetuated by the admonishment Jesiah was receiving, which has been found to lower rates of a student’s engagement (Swinson, 2017). Additionally, evidence has shown that understanding students’ voices has helped teachers gain insight into changing the way they think about pupils (Flutter, 2007).

### Systemic Implications

From discussions during supervision, it became apparent that similar formulations arose from casework that another EP was involved in. Further reflection led to potential systemic implications drawn from themes of eliciting the child’s voice and teacher–student relationships. With consent sought from Jesiah to share the information, a review meeting was arranged to feedback the process with the SENDCo, teacher and Jesiah’s parents.

### Therapeutic Group Intervention

The following section reflects on the multi-modal aspects of formulation for a therapeutic group intervention carried out with five boys in Year 6. The rationale for the boys being in the group was around building their self-esteem and providing them with a space to reflect on friendships and positive decision making. The section will begin by presenting

**Figure 3***Stages of Formulation During Therapeutic Intervention*

the planning stages, followed by drawing on psychological theory underpinned by Bion's (1961) theory of group processes, attunement. Interlinks between assessment, intervention and evaluation will also be made.

### Planning

#### Practice Framework

Planning stages were facilitated by Problem Based Learning group discussions in the early stages of setting up the intervention. Monsen et al.'s Problem Solving Model (Monsen & Frederickson, 2008) was used to ensure logistics were in place to carry out the interventions. Applying a practice framework helped to consolidate my thoughts and exercise skills in contracting and negotiation in the planning process. However, following the needs analysis, I realised that the initial idea for a prescriptive approach of applying a therapeutic story writing framework would not be appropriate. This group of boys were in Year 6 and were coming to the end of the concrete operational stage of development (Piaget, 1964). By this point, the concept of using metaphors to explore emotional issues may have been ineffective. In future planning, this made me reflect on choosing approaches that best suited the group and their individual needs.

#### Needs Analysis

To facilitate initial formulations, a needs analysis was conducted where observations were carried out on the "coping styles" of the five boys. The assessment focused on the characteristics the children have for "coping" when faced

with their problems (Weerasekera, 1996). It also provides a framework for the teaching staff to share and view perceived problem behaviours differently.

### Formulation

Throughout the group intervention, a systemic approach to formulation was adopted. The rationale for this approach was prompted by transition from an expert position to a constructionist stance, which acknowledges the subjective nature of knowing (Dallos & Vetere, 2003). Subjectivity in this form allows for the two main strands of systemic formulation, assessment and intervention to be intertwined.

#### A Working Hypothesis

Following the needs analysis, I realised that a working hypothesis was needed as opposed to a concrete hypothesis for the group to evolve organically. To maintain a working hypothesis, I used technical and interpersonal skills while being systematic and adaptive (Monsen, Graham, Frederickson, & Cameron, 1998). This was to ensure the needs of the children and the group were met.

I felt "stuck" when I managed the group dynamics in the first session, as the group was vocal and expressive. Feelings of "stuckness" stemmed from difficulties I felt managing the dynamics between more extravert members of the groups who were friends, compared to the quieter members. I then realised this anxiety stemmed from initial expectations to carry out a structured approach to the therapeutic group intervention. Smith and Berg (1987) argue that the notion of stuckness stems from attempts to resolve the difficulties

encountered rather than trying to release them. Upon reflecting on my initial expectations of the group, I then steered my focus to the process of formulation instead of the concrete outcome of the sessions.

### **Multidimensional Approach**

A working hypothesis meant that formulation was multimodal, conceptual and flexible according to individual and group needs. It required me to be reflexive in order to maintain a meta-perspective of the group.

I refer to the notion of adopting an “inside” and “outside” position in order to conceptualise the formulation process (Dallos & Vetere, 2003). Two main factors enabled me to maintain these positions, first of which is being aware of the importance of the sense of self between myself and group members in creating a therapeutic space (Cox, 1988). Second, Weerasekera’s (1996) “coping styles” provided me with a lens to understanding the children as individuals in order to address emotional or relational issues. Accommodating each child’s initial style meant the therapeutic relationship was strengthened and this was then evident as the sessions progressed.

### **Individual Versus Group Formulation**

The Building Blocks of Self-esteem (Borba, 1989) was used to develop an overall group formulation, for example, using the group to promote a sense of security. However, a challenge I encountered was in managing the competing demands of individual and group formulations that coexisted throughout. For example, one child was disengaged in the first session and posed some questions around his position of the group. This posed a perceived challenge to my position as a facilitator, as, ethically, I questioned having him in the group, knowing he did not want to attend. In supervision, I reflected on how him being in the group, coming to and contributing to the group, signified that he perhaps wanted to be there. I wondered about the possible functions of him saying otherwise and referred to the Compass of Shame (Nathanson, 1992). I then reflected on how shame is a protective dynamic to avoid the appearance of being seen as vulnerable or humiliated (Ersine, 2015). From this, I hypothesised that the function for this avoidance behaviour was that engaging in the group would be admitting defeat that he needed help of any kind. In exploring this hypothesis, I noticed his shame coping scripts conveyed feelings of denial, self-consciousness and contempt to being in the group (Eliason, Pulos, & Lennon, 2006).

### **Uncomfortable Feelings**

As positions in the group strengthened, problem-free talk (PFT) allowed the group to externalise uncomfortable feelings that enabled them to explore the problem in their own

words. It also meant tensions could be acknowledged and all members could feel comfortable with this emotion. Eventually, the tensions reduced, and the group’s purpose fulfilled individual as well as the collective needs of the group.

PFT gave rise to opportunities to draw out their individual strengths, making known the presence of others so that they could use each other as a means for support. Additionally, PFT is believed to empower people to believe they have the resources and skills to resolve their own difficulties (Daki & Savage, 2010).

Similarly, the process of doing “feeling check-ins” promoted trust and transparency among other members of the group. It contributed to the equilibrium of the group, especially for members who were considered quieter and internally anxious by their teacher. Referred to as the paradox of disclosure (Smith & Berg, 1987), the act of quieter members hearing more dominant characters talk about their problems made them feel more comfortable, knowing others too had anxieties.

### **Group Processes**

A psychoanalytic approach drawing on Bion’s (1961) experience of groups provides a key lens for understanding group processes. Consideration of group processes allowed me to understand the undercurrents of interactions in the group, which I reflected on throughout.

### **Coexisting Mentalities**

Bion (1961) suggests that groups operate in two contrasting ways:

- Work group mentality (WGM): the extent the group manages shared tensions and anxieties to function effectively; and
- Basic assumption mentality (BAM): state of the group when they are taken over by strong emotions from unconscious needs.

The regressive nature of groups is often related to BAM. However, my experience of the group has demonstrated the need for both mentalities to coexist in order to facilitate change in the process. For example, strong emotions that arose from PFT and feeling check-ins were needed to be felt in order to explore how to manage them.

Throughout the sessions, the group demonstrated skills in helping each other to manage anxieties (WGM) (for example, by providing encouragement). Although this took place between two individuals, the interaction was noticed by the other members of the group who contributed unconsciously to WGM. In situations where pairing took place, I used the opportunity to observe team roles associated with behavioural and interpersonal strengths (Belbin, 1981).

As the facilitator, I maintained the structure of the group by adopting multiple points of view (Bion, 1961). This consisted of reflecting on the individual perspectives of children, my own perspective, the positioning of the children and the positioning of myself within the group. Eventually, the group would be in a WGM which is referred in my reflections of the group as being “on task” or “settled”. However, although seen more desirable by Bion (1961), I noticed that BAM was obscure and had a paradoxical effect on the group. When the group appeared to have BAM (e.g., behaviours such as making jokes or going off-topic in conversation), I was able to identify interests of the group which I could use as a medium to promote WGM in future sessions.

### Alternative Approaches

With the above perspective in mind, one can argue that, in this analysis, there is a reliance on unconscious processes which are subject to interpretation. Perhaps if sessions were structured and had prescribed outcomes, WGM would be more explicit, and the analysis of group functioning might be more reliable than analysing implicit processes. In which case, referring to Tuckman’s (1965) theory of group process might have been more appropriate. However, Tuckman’s stages might diminish the purpose of a working hypothesis that facilitates creativity and problem-solving. The hierarchical nature of the stages also depends on a leader to promote a group that views conflict and tension as ineffective.

### Leaderless Group

In a similar manner to Bion’s (1961) experience of groups, I noticed that I was taking a step back from leading the group. Without impairing the structure of the group as a whole, I reconciled with the tensions I initially felt from mobilising the emotions of the more vocal and expressive members of the group.

Throughout the sessions, members of the group, including myself, started to feel more comfortable. In my reflections, I progressively referred to “facilitating” and began to observe the group having their own discussions. My role became more about how I facilitated these meaningful discussions. According to Bion (1961), taking a step back from the group reduces dependency on the leader. As a result, the group evolved organically, and the children began to use each other as resources.

### Attunement

The process as a whole highlighted the importance of the therapeutic relationship. Otherwise termed as therapeutic attunement, this is a central component in facilitating formulation (Erskine, 2015). Attunement is reciprocal and is sensitive to identifying the children’s needs or feelings as well

as communicating this sensitivity to the person. Being attuned involved a level of spontaneity and improvisation, experimenting with the group with what they enjoyed.

It was important to consider factors that may have impacted attunement, such as the appropriateness of implementing a reward system to manage behaviour. I decided that introducing the notion of reward/punishment may have inflicted feelings of judgement. It would have affected the process of attunement by potentially diminishing the group being a safe space for exploration. As the sessions unfolded, I had to exercise the ability to stay aligned and be alert to every moment in order to create a therapeutic connection (Kosak, 2009). In doing so, I utilised interpersonal skills, such as being understanding, empathetic, supportive and accepting.

### Evaluation

Several factors contributed to evaluating the impact of the intervention. The theory of change, which is the theory of how and why an initiative works (Weiss, 1998), provides a framework for overseeing how formative evaluation contributed to the process of change. Theory of change can be developed for an intervention that changes and adapts over time in response to emerging issues or decisions made (Rogers, 2014). Informal formative assessment (Yorke, 2003) was most appropriate for measuring impact as it embodied the supportive and therapeutic nature of the group, as well as the needs of the children.

As seen by the circularity of the process, evaluation was determined by variables including areas of self-esteem, behaviour change, group processes and therapeutic factors. Reflection and supervision enabled me to gather ongoing feedback as the group evolved, allowing me to reformulate or refine the following sessions. As a reflective practitioner, collaborative evaluation took place which involved helping those in the group to reflect on their actions. The children needed to be able to provide insight into their experiences of this child-centred approach to the intervention.

As well as holding informal dialogues with staff after each session, qualitative information was sought from a mid-intervention review I held with the class teacher. Formative evaluation also involved recording a reflective diary after each session which included observational statements from the children. Therapeutic approaches such as “Strength Cards” were also useful in assessing the value of my own input and how they perceived my role.

To promote the dissemination of principles drawn from the intervention into the school system, the teacher and TA attended two sessions. A review meeting with the teacher and SENCo was also arranged to share resources and discuss the process as a whole.

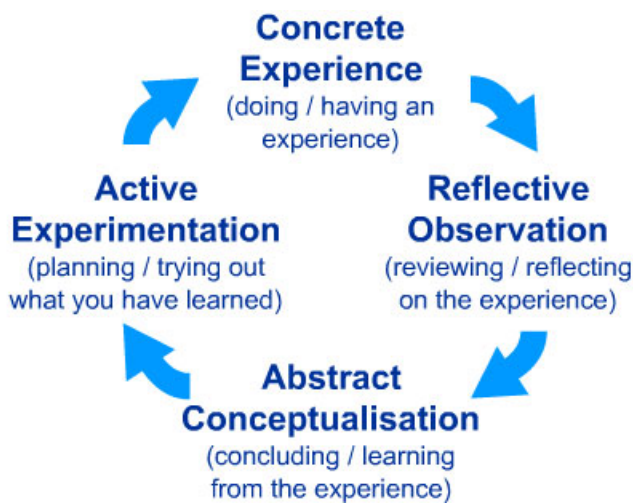
### Final Reflections

The process of carrying out therapeutic interventions made me reflect on how we speak with children but also on how we listen to their concerns and develop interventions which are led by their interests. In doing so, it was important to accept that groups will be heterogeneous. I came to recognise that groups are social entities where individuals not only act but also reflect on their actions (Smith & Berg, 1987). The nature of these reflective processes informed subsequent actions which became apparent throughout the sessions.

Throughout the intervention process, I used Kolb's (1976) reflective cycle (Figure 4) as a tool that enabled me to reflect on how each experience (session) was turned into learning, where learning points were applied to the following session. It became an overarching process of active experimentation on a week-by-week basis that allowed me to re-evaluate my practice and reflections. This also involved asking the children what could be improved each session, making it explicit that the sessions were for them and that they felt comfortable to share their thoughts.

**Figure 4**

*Kolb's (1976) Reflective Cycle*



Through abstract conceptualisation, I felt I could test my own formulations by thinking out loud how I interpreted the experience. In turn, the reflective cycle enabled me to confirm or reject certain hypotheses.

My initial assumptions on conducting therapeutic interventions were to constantly resolve difficulties and reduce the feeling of stuckness. The reflective process facilitated this, enabling me to ask questions such as:

- What perspective have I taken on my own/others' actions and experiences?
- How have I interpreted the experience?

- What meaning have I assigned to the experience?
- How have I tested the hypothesis?
- Has it been accepted or challenged?
- Am I keeping an open mind?

In exploring the true participation of children, I also held in mind my own experience of supervision and the notion of a "safe space". I was introduced to a process model of supervision (P. Hawkins & Shohet, 2000), which draws on the principles from Schein's (1999) process model of consultation. Aspects of this model promoted problem-solving by making connections between observations, emotional reactions, interpretations and judgement. By being an extension of reflective practice, supervision meant I could try to apply these principles to help me resolve unresolved self-reflections and consider different perspectives and the impact of my own practice. Supervision provided a safe space to monitor and evaluate my own practice, as well as promote transparency in the decisions I made.

### Implications for EP Practice

Legislation has renewed the educational psychology profession's focus on gaining children's views. As such, this has endorsed UNCRC's principles around the rights of the child. With EP's being uniquely positioned to advocate for children's views, carrying out therapeutic interventions can offer an effective medium for promoting the voice of the child. Based on this experience, and to share with colleagues wanting to develop therapeutic interventions that promote the voice of the child, I leave with some implications for practice.

- Lundy's (2007) model of participation provides professionals with a clear and practical framework for promoting the participation of children. It might help to develop clarity around whether they have done enough to facilitate the genuine participation of the children in the intervention process.
- Therapeutic interventions underpinned by models such as Lundy's (2007) supports a person-centred approach in therapeutic practice that can break cycles of dominant, problem-focused narratives around children.
- Consideration should be given to the individual needs of the child as well as the needs of the group when reflecting on unconscious processes. In doing so, conducting a needs analysis provides a useful way to assess the context around the child which might result in individual as well as systemic implications.

- Reflection tools using models such as Kolb's (1976) (Figure 4) reflective cycle can enable practitioners to revisit their own skills and approaches. Using this as a framework for reflection can help one to reflect on relationships developed within groups and the principles of attunement and factors that might affect attunement. "Active conceptualisation" within Kolb's (1976) cycle can prompt thinking on how to re-evaluate input (for example, skills, approaches, ways of "being") after each session. These evaluations might be in the form of shifts in thinking or based on responses of the children. Over time, it might become clear how assessment, intervention and evaluation are intertwined. This, in turn, might inform on how to move the intervention forward.
- Drawing on psychological theories and models of unconscious processes can create transparency in decision making during the therapeutic process. Supervision can be a valuable vehicle for allowing professionals to consider their role and position within the therapeutic relationship — whether this is as a facilitator or a leader.
- Holding in mind Billington's (2006) critical questions and questions within Lundy's model can have evaluative purposes by reflecting on the effectiveness and nature of the group. Qualitative feedback by eliciting their views can encourage thoughtful and reflective comments that encourage a meaningful form of participation (D. Hawkins & Soni, 2018).

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